FEC MAIL CENTER 2015 MAY -5 AM 7: 53

Committee Name:

USA STRONG PAC

If registered, FEC ID:

Today's Date:

4-27-15

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

///(//

Respectfully submitted,

Treasurer's Name:

Daniella Acosta

, Treasurer

1503 - 142 - 2894

FEC FORM 1

STATEMENT OF ORGANIZATION

FEC MAIL CENTER
2015 HAY -5 AM 7: 53

1011101				Office Use Only	AM 7	/: 53
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5			
USA STROP	VG PAC		<u> </u>	1 1 1 1 1	<u> </u>	
	, D.F.			<u> </u>		
ADDRESS (number and street)	49 North	Federal	HWY	1.1.1.1.1	1 1	
(Check if address is changed)	#104	1111111				
	POMPANO, L	BEACH	STATE A	33062-1	DDE 🛦	
COMMITTEE'S E-MAIL ADDRE	ESS					
(Check if address is changed)	USA STROM	VG PAC @ G	5MAIL 0	COM	! !	,
is changed,	Optional Second E-Mail Add					
2. DATE Ö' Å	T'ŽŎĬŠ	STRONG PAC]	. 1	
3. FEC IDENTIFICATION N	•					
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)				
I certify that I have examined t	this Statement and to the best	of my knowledge and belief	it is true, correct a	nd complete.		
Type or Print Name of Treasure	DANiella	ACOSTA				
Signature of Treasurer	ed for	5	Date $\overset{\mathtt{M}}{\bigcirc}\overset{\mathtt{M}}{\checkmark}$	' 27' Z	ŽŎ <i>Ĭ</i>	<u>Š</u>
NOTE: Submission of talse, error		may subject the person signinç		he penalties of 52	U.S.C. §	30109
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FOR (Revised 06/2		_

FEC Fo	orm 1 (Revised 02/2009) Page 2						
	COMMITTEE e Committee:						
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)						
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
Name of Candidate							
Candidate Party Affiliat	Office State tion Sought: House Senate President District						
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.						
Name of Candidate		!					
Party Cor							
(d)	(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) P.	arty.					
Political A	Action Committee (PAC):	-					
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	is a					
	Corporation Corporation w/o Capital Stock Labor Organization	n					
	Membership Organization Trade Association Cooperative						
,	In addition, this committee is a Lobbyist/Registrant PAC.						
(1)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or p committee. (i.e., nonconnected committee)	arty					
•	In addition, this committee is a Lobbyist/Registrant PAC.						
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
Joint Fund	draising Representative:						
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.						
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.						
Con	nmittees Participating in Joint Fundraiser						
1.	FEC ID number C						
2.	FEC ID number C						
3.	FEC ID number C						
4.							

FEC Form 1 (Revised 02/2009) Write or Type Committee Name Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Mailing Address CITY STATE ZIP CODE Connected Organization **Affiliated Committee** Joint Fundraising Representative Leadership PAC Sponsor Relationship: Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records. Full Name Mailing Address Title or Position CITY STATE ZIP CODE Telephone number Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name of Treasurer Mailing Address STATE ZIP CODE Title or Position

Telephone number

FEC Form 1 (Revised	d 02/2009)		Page 4
Full Name of Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position			
	Telephon	ne number	
Banks or Other Depositoric safety deposit boxes or main Name of Bank, Depository, of the Mailing Address	etc.	leral, H	33062 -
	CITY	STATE	ZIP CODE
Name of Bank, Depository, e	etc.		
Mailing Address			<u> </u>
		ليا ل	
	CITY	STATE	ZIP CODE

USA STRONG PAC

49 N. Federal

29 APR 2015 PM 4

Federal Election Commission 999 E. Street, N.W. Mashington

MARY-5 MM 7:53

MINNE FL 33

(3/2015)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Postmarked Date of Receipt **USPS First Class Mail** Postmarked (R/C) USPS Registered/Certified Postmarked **USPS** Priority Mail Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): Next Business Day Delivery Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): PREPARÉR DATE PREPARED